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CENTRAL FAX CENTER****DEC 05 2007**Steven J. Miller, Esq.*
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FAX MESSAGETO: USPTO – COMMISSIONER FOR PATENTSDATE: DECEMBER 5, 2007TIME: 9:35 AM EST

FROM: S.J. MILLER, ESQ.

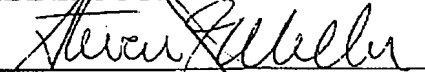
TOTAL NUMBER OF PAGES (INCLUDING COVER SHEET): 4

RE: US PATENT APPLICATION NUMBER 10/679,075

MESSAGE:

PLEASE FIND ATTACHED HERETO REQUEST FOR WITHDRAWAL AS
ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS.

THANK YOU.


STEVEN J. MILLER, ESQ.
USPTO REG. NO. 48368

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PTO/SB/01 (10-07)

Approved for use through 10/31/2007. OMB 0851-0031

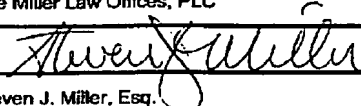
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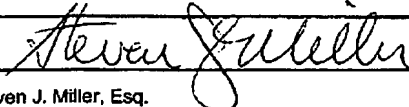
TRANSMITTAL FORM	Application Number	10/679,075
	Filing Date	10/03/2003
	First Named Inventor	Steven Durham
	Art Unit	3633
	Examiner Name	A. PHI DIEU TRAN
Total Number of Pages in This Submission		Attorney Docket Number Durham - 2003

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of transmission Form (PTO/SB/97).
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	The Miller Law Offices, PLC		
Signature			
Printed name	Steven J. Miller, Esq.		
Date	12/05/2007	Reg. No.	48368

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Steven J. Miller, Esq.	Date	12/05/2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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APPLICATION NO. 10/679,075

Certificate of Transmission under 37 CFR 1.8

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on December 5, 2007

Date


Signature

Steven J. Miller, Esq.

Typed or printed name of person signing Certificate

48368

Registration Number, if applicable

305-803-5168

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper. Documents included:

This Certificate of Transmission Form (PTO/SB/97); Transmittal Form (PTO/SB/21);

Request for Withdrawal as Attorney and Change of Correspondence Address (PTO/SB/83).

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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PTO/SB/83 (01-08)

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/679,075
Filing Date	10/03/2003
First Named Inventor	Steven Durham
Art Unit	3633
Examiner Name	A, PHI DIEU TRAN
Attorney Docket Number	Durham - 2003

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

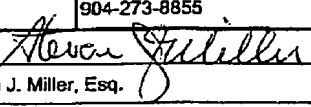
The reasons for this request are: Pursuant to 37CFR10.40(c), there are irreconcilable professional, procedural and other differences between the undersigned practitioner and client/inventor, including, but not limited to, making it unreasonably difficult for the practitioner to carry out his employment effectively and the existence of other good cause for withdrawal.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Steven Durham		
Address	166 Bermuda Court		
City	Ponte Vedra Beach	State	FL Zip 32082
Country	USA		
Telephone	904-273-8855	Email	stvdhrm@yahoo.com
Signature			
Name	Steven J. Miller, Esq.	Registration No.	48368
Date	12-05-2007	Telephone No.	305-803-5168

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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